BERNARD SANDERS, VERMONT, CHAIR

PATTY MURRAY, WASHINGTON
ROBERT P. CASEY, JR., PENNSYLVANIA
TAMMY BALDWIN, WISCONSIN
CHRISTOPHER MURPHY, CONNECTICUT
TIM KAINE, VIRGINIA
MARGARET WOOD HASSAN, NEW HAMPSHIRE
TINA SMITH, MINNESOTA
BEN RAY LUJAN, NEW MEXICO
JOHN W. HICKENLOOPER, COLORADO
EDWARD J. MARKEY, MASSACHUSETTS

BILL CASSIDY, LOUISIANA RAND PAUL, KENTUCKY SUSAN M. COLLINS, MAINE LISA MURKOWSKI, ALASKA MIKE BRAUN, INDIANA ROGER MARSHALL, KANSAS MITT ROMNEY, UTAH TOMMY TUBERVILLE, ALABAMA MARKWAYNE MULLIN, OKLAHDMA TED BUDD, NORTH CAROLINA

United States Senate

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS WASHINGTON, DC 20510–6300

WARREN GUNNELS, MAJORITY STAFF DIRECTOR AMANDA LINCOLN, REPUBLICAN STAFF DIRECTOR

www.help.senate.gov

October 17, 2023

VIA ELECTRONIC TRANSMISSION

The Honorable Bernard Sanders Chair Committee on Health, Education, Labor, and Pensions Washington, D.C. 20510

Dear Chair Sanders:

In light of your interest in expanding access to health care in schools, I write to request your commitment to establishing a process to review and evaluate school-based health centers at the Senate Health, Education, Labor, and Pensions Committee.

While we spent months discussing the Community Health Center Fund reauthorization, no specific policy related to primary care in school-based settings was ever proposed or discussed. Your inclusion of \$500 million in new mandatory funding in your initial reauthorization effort, S. __ Primary Care and Workforce Expansion Act, and directive to provide least \$55 million in mandatory funding in \$.2840 establishes new precedent that we have not seen in the statute authorizing the Community Health Center Fund (42 U.S.C. 254b-2) since it was created in 2010.

Notably, S. 2840 departs from your initial proposal, which referenced the school-based health center program that is currently authorized through FY2026. Critically, the school-based health center program under 42 U.S.C. 280h-5(a)(3) includes language to prohibit the provision of abortion. This statute also specifies that services are to be provided in accordance with "...State laws, including parental consent and notification laws that are not inconsistent with Federal law."

At a time when Biden Administration officials publicly characterize parental involvement in their child's education as "misbehavi[or]" and use taxpayer funded resources to promote judicial bypass and allow minors to obtain an abortion, it is concerning that S. 2840 opted for a vague reference to school-based health sites rather than refer to the existing statutory definition for a school-based health center under 42 U.S.C. 280h-5(a)(3).

In anticipation of the need to reauthorize the discretionary school-based health center program, and due to your interest in providing additional mandatory funding for primary care in school-based settings, I ask you to hold a HELP Committee hearing on the school-based health center program and other school-based health care settings, such as the Full-Service Community Schools program, and to join me in each of the following requests —

- <u>Comptroller General:</u> review of all available funding sources to school-based health centers.
- <u>Department of Health and Human Services Office of the Inspector General:</u> review of compliance with abortion prohibitions and state parental consent laws under the school-based health center program, including state laws related to gender transition.
- <u>Health Resources and Services Administration (HRSA):</u> request for data collection improvement to track historical and current school-based health centers, or other HRSA-funded school-based settings, and creation of a new metric measuring classroom outcomes of patients receiving care.

Sincerely,

Bill Cassidy, M.D.

Bill Cassidy, M.D.

Ranking Member

U.S. Senate Committee on Health,

Education, Labor and Pensions

cc: The Honorable Roger Marshall (R-KS)